FOR INSTRUCTIONS, SEE BACK OF FORM  DISCLOSURE SUMMARY P	MCE	ſ	FORM	
	<u></u>		DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Org			(Rev. 12/2005)	REPORT
Suckinson Country	Democrata		For Office Use Or	
duckensor county	2008 SFP -2 AM 9- 0F			
IMPORTANT: Indicate by # type of committee you are reporting fo (1)Statewide/Legislative/Judge Standing for Retention Candidate	(2)State PAC (3)State Party			
(4) County Central Committee (5) County Candidate (6) City Can	ididate (7) School Board or Other Politic			
Subdivision Candidate (8) County PAC (9) City PAC (10) School (11) Local Ballot Issue	Il Board or Other Political Subdivision PA	3 1		
CANDIDATE COMMITTEES ONLY:		= [		
Candidate Name	Political Party (if applicable)		File with: lowa Ethics and	Campaign
			Disclosure Board	d , J
Office Sought	District (if Senate or House)		510 E. 12 <sup>th</sup> , Ste. Des Moines, low	
			Fax: 515-281-37	
Late reports are subject to possible civil and criminal penalties. Find the candidate, for a candidate's committee, and the chairperson, individual responsible for filing timely and accurate reports.	ursuant to lowa Code section 68B.32/ for any other type of committee, is the	A(7)		
Janis W. Grant	7/3 333-3	304	201-	selaa
SIGNATURE OF PERSON FILING REPORT	7/2 332-2 TELEPHONE	<u> </u>	DATE S	IGNED
I AM FILING An October 19, 2006				
☐ CHECK IF AMENDMENT TO REPORT DATED	of Dissolution Form DR-3.	County &	nmittees, enter Da Local Committees ttion is held	
STATEMI	ENT OF CASH ON HAND			<u> </u>
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is f	cash on hand at the end	\$	5 3	<i>73. 3</i> 3
ADD TOTAL MONEY TAKEN IN THIS PERIOD		Ψ		, 0 . 00
Schedule A: Cash Contributions total (Attach Sched	ule A) (*also see in-kind below)		<del>4</del>	62.99
Schedule F: Loans Received total (Attach Schedule	•			
Schedule H: Total Sales of Campaign Property (Atta				
(Schedule H applies to Candidates' Com		***********		
		\$	م سے	2 / 2 2
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	000 10172	•••••••		36.32
Schedule B: Expenditures total (Attach Schedule B)			10	00.00
Schedule F: Loan Repayments total (Attach Schedu	•			
CASH ON HAND at the end of this reporting period (if final rep	•	***********	<del> </del>	
be zero) (Attach DR-3)	or balance mast	\$	4 8	36.32
		φ		
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
		\$		
**UNPAID BILLS (From Schedule D - Attach Schedule D) *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule**OUTSTANDING LOANS (From Schedule F - Attach Schedule**	dule E)	\$		
**N KIND CONTRIBUTIONS (From Schedule E - Attach Schedus**OUTSTANDING LOANS (From Schedule F - Attach Schedus	dule E)	\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedut*OUTSTANDING LOANS (From Schedule F - Attach Schedut*CONSULTANT BREAKDOWN (Schedule G Attached?)	dule E)	\$		
TIN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E - Attach Schedule F - Attach Schedule CONSULTANT BREAKDOWN (Schedule G Attached?)  CANDIDATE COMMITTEES ONLY:	dule E)le F)	\$ \$ 		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched *OUTSTANDING LOANS (From Schedule F - Attach Schedu CONSULTANT BREAKDOWN (Schedule G Attached?)	dule E)le F)	\$ \$ \$		

FOR INSTRUCTIONS, SEE BACK OF FORM

## For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Licenson County Democrats

10/19/2006 report			
SCHEDULE			
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08/17/06	ID# CK#	DCD Picnie at Bedell State Park - Unitemized Contributions		\$393.00	V
10/16/06	ID#	Clarys Berryhell 1203 21 avenue Milford, Ja 51351		25.00	v
09/28/06	ID# CK#	Bank Midwest 1102 Sanborn Evenue Okologie, 50 51355 (Quarterly interest on saving		44.02	
07/31/06 08/31/06 09/31/06	ID# CK#	Bank Medwest Okologi . Ia 51355 (Monthly interest on checking account	- <b>\</b>	. 25	· · · · · · · · · · · · · · · · · · ·
	ID#	in craiming account			·· ·
	ID# CK#				
-	ID# CK#				
	ID# CK#				
	ID#		-		
	ID# CK#		·		
			SUB-TOTAL		

TOTAL (if last page of this schedule)

a contribution to the

Page / of / (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
Sick	kinson Co	nuty Democrats		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	MAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/24/06	ID# CK# 7/2	Not Berryhill 1203 21 avenue Milford, Sa 51351	Campaign for state senator	\$ 1000.00
	ID# CK#			
	ID# CK#			
	ID# CK#		#	
	ID# CK#			
	ID# CK#			
1	ID# CK#			
	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	\$ \$/000-00

THIS DAY	ADDI IEC	TO CANDIDATED	COMMITTEES ONLY:
HIND BOX	ALLFIED	I C CANDIDA LES	COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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